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NOTICE OF FILING / CLAIM FEE(S) DUE (CALCULATION SHEET)

APPLICATION NUMBER: 09 520029

Total Fee Calculation

	Fee Code	Total	Number			
	Sm./Lg.	# Claims	Extra X	Fee Sm. Entity	Fec =	Total
Basic Filing Fee	201/101	k 1 <i>P</i>)	0.0		690.	
Total Claims >20	203/103	10 .20.	$\frac{20}{x}$		360.	
Independent Claims >3	202/102	.3 -	x		178	
Mult. Dep Claim Present	204/104					
Surcharge	205/105				130.	
English Traditation	139					
TOTAL FEE CALCULA	TION			•	•	,
Fees due upon filing the	he application:					
Total Filing Fees Due	= S	1258	00			
Less Filing Fees Subm	iiπed - \$	0				
BALANCE DUE	= \$ _/	258,	(7)			
Office of Initial Patent	Examination			-	. 🛶 🤜	

Figure 7

								A	Application or Docket Number				
PATENT APPLICATION FEE DETERMINATION RECOI Effective December 29, 1999							RD		29	5	200	29	
CLAIMS AS FILED - PART I (Column 1) (Column 2)								ALL PE	ENTITY	OR	OTHER SMALL		
FO	R		NUMBE	R FILED		NUMBER E	EXTRA	RA	TE	FEE	1	RATE	FEE
BAS	SIC FEE						477	¥.04	345.00		OR	维约	690.00
TOTAL CLAIMS 46 minus $20=$ * 26					X\$	9=		OR	X\$18=	360			
INDEPENDENT CLAIMS					X39=			OR	X78=	1/8			
MULTIPLE DEPENDENT CLAIM PRESENT								+130=		<u> </u>	OR	+260=	
* If the difference in column 1 is less than zero, enter "0" in column 2							olumn 2	TOTAL .			OR	TOTAL	1128
	C	LAIM	S AS A	MENDED) - F	PART II					1	OTHER	THAN
	(Column 1) (Column 2) (Column 3)							SMALL ENTITY			OR	SMALL	
ENT A	A	REM Af	AIMS IAINING FTER NDMENT	11.75	Pi	HIGHEST NUMBER REVIOUSLY PAID FOR	PRESENT EXTRA	RA	ΤE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT	Total	•	40	Minus	**	40	=	X\$	9=		OR	X\$18=	
AME	Independent	<u> -</u>	4	Minus	***	- 4	=	X3:	9=		OR	X78=	
	FIRST PRESE	NTATIC	ON OF MU	JLTIPLE DEF	PENI	DENT CLAIM		+13	<u></u>			+260=	
							•		U= OTAL		OR	+260= TOTAL	
								ADDIT.			OR	ADDIT. FEE	-
\neg	54774 BEST		umn 1) _AIMS	Take Service College		Column 2) HIGHEST	(Column 3)					· · · · · · · · · · · · · · · · · · ·	
MENT B		REM Al	MAINING FTER NDMENT		Pf	NUMBER REVIOUSLY PAID FOR	PRESENT EXTRA	RA	ΓΕ	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*		Minus	**		=	X\$	9=		OR	X\$18=	
AMEND	Independent	•		Minus	**		=	X39	}=		OR	X78=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+13	0=		OR	+260=	
								TC ADDIT.	OTAL			TOTAL	
(Column 1) (Column 2) (Column 3)									FEE] ,	ADDIT. FEE	<u></u>
		CL	_AIMS			Column 2) HIGHEST	(Column 3)			ADDI-	l		ADDI-
AMENDMENT C		Al	MAINING FTER NDMENT		Pi	NUMBER REVIOUSLY PAID FOR	PRESENT EXTRA	RAT	ſΕ	TIONAL FEE		RATE	TIONAL FEE
NDW	Total	*		Minus	**		=	X\$:	9=		OR	X\$18=	
ME	Independent	<u> • </u>		Minus	**	*	=	X39)= 			X78=	-
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM										OR	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	<u> </u>
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.									0=		OR	+260=	
**	if the entry in colul If the "Highest Nui If the "Highest Nui	ımber Pr	reviously Pa	aid For" IN THI	IS SP	PACE is less that	in 20, enter "20."	ADDIT.	FEE		OR	TOTAL ADDIT. FEE	
	The "Highest Num	mber Pre	eviously Pa	id For" (Total o	is or ir Indi	ependent) is the	n 3, enter 3. highest number	r found in t	he ap	propriate bo	x in col	lumn 1.	